

[2nd March 1926]

APPENDIX II.

[Vide answer to question No. 1489-A asked by Mr. P. Anjaneyulu at the meeting of the Legislative Council held on the 2nd March 1926, page 22 supra.]

Copy of letter from the Surgeon-General with the Government of Madras, R. No. 451-G. of 26, dated 25th February 1926.

With reference to the article appearing in the 'Hindu' dated 12th February 1926, I have the honour to report that I investigated the case and the following are the facts.

2. The late student S. Gopalasundram was brought to the General Hospital by his fellow students in a car on the morning of the 8th instant most probably at 8-30 a.m., as stated by Dr. Krishna Rao, and he walked from the car into the out-patient department and lay on a couch in the verandah.

3. Between 9-30 and 11 a.m., the Duty Assistant Surgeon Mr. K. I. John whose duty it is to admit the patients into the hospital saw all the patients who were earmarked for admission and selected the nine cases which he considered were seriously ill and refused admission to the others for want of vacant beds.

4. The note from Dr. Krishna Rao was seen by Mr. John who examined the patient. The Assistant Surgeon after the examination did not consider the student sufficiently ill to necessitate his ordering an extra bed.

5. On enquiry, it has been ascertained that the students who brought the patient to the hospital tried their best to persuade the Assistant Surgeon to reconsider his decision. The Assistant Surgeon, however, apparently stuck to his original opinion. On the day in question there were five vacant Indian beds and seven cases were admitted.

6. The student's friends after being refused admission obtained a taxi and took the patient back to Dr. Krishna Rao and reported what had occurred at the hospital. Dr. Krishna Rao advised them to proceed at once to the Rayapuram hospital where he was admitted as soon as possible. I say 'as soon as possible' advisedly because apparently it was not done immediately inasmuch as the Duty Assistant Surgeon was engaged in admitting other patients at the time when the student was brought to the hospital. Consequently he could not be attended to immediately. The doctor at Rayapuram at first stated that inasmuch as the patient arrived after out-patient hours he could not be admitted. He, however, upon realizing the condition of the patient made arrangements to admit him at once and this was done.

7. From the above statements it is obvious that a very regrettable and unfortunate incident has occurred due to the fact that the medical man in charge of the admissions at the General Hospital did not attach sufficient importance to the condition of the patient.

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8. In the extenuation of the circumstances I would point out that at the General Hospital, like most hospitals, there are invariably a larger number of patients seeking admission than there are vacant beds. I may add that I have been Resident Medical Officer at the above hospital for a good many years and know the difficulties in which the Medical officers who admit patients are placed. It becomes practically a daily experience of shroffing out those patients who should be admitted and those who could afford to wait and come again another day. It is possible that such accidents will occasionally happen even if the greatest care be exercised. In this particular case the Assistant Surgeon made a mistake which unfortunately was followed by most disastrous results.

9. The Surgeon-General proposes to deal with the Assistant Surgeon departmentally.

